



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of)

HUOTARI et al.)

Unit 3732

Application Number: 10/575,956)

Examiner:

Filed: November 21, 2006)

Hao D. Mai

For: DENTAL UNIT AND METHOD FOR)
FEEDING WATER)

ATTORNEY DOCKET NO. PLAN.0002)

Mail Stop Amendment
Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	24	24	4 (Over 20)	x \$52	0
Independent Claims	2	2	(Over 3)	x \$220	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$390	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28).				x ½	
				TOTAL	\$0

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

[x] Response and Amendment to Office
Action (without claim amendments)
[] Substitute Abstract
[] Terminal Disclaimer

[] Information Disclosure Statement
[] ___ sheets of drawings
[] RCE
[] Other: _____

☒ Applicant(s) hereby request and petition that the time for taking action in this case be extended pursuant to 37 C.F.R. § 1.136(a) for:

☒ **one (1) month** ☐ **two (2) months** ☐ **three (3) months**

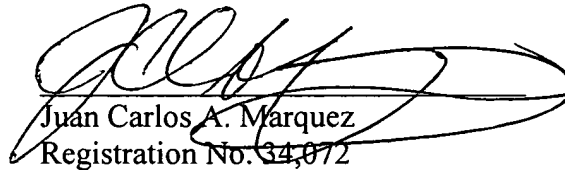
The fee set in 37 C.F.R. § 1.17 for the extension of time is **\$130.00** for a large entity.

☒ Credit card information for **\$130** to cover the 1-month extension of time fee associated with this filing is enclosed.

☐ Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____.

☒ The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit Account Number 12-0555**.

Respectfully submitted,


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